## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number 09761795

| CLAIMS AS FILED - PART I  |  |   |                 |   |  |                  |            | MALL EI      | YTTTY                  |       | OTHER     | THAN                   |
|---|--|---|-----------------|---|--|------------------|------------|--------------|------------------------|-------|-----------|------------------------|
|   |  |   | (Column 1)      |   | (Column 2)                             |                  | T          | YPE [        | $\Rightarrow$          | OR    | SMALL     | ENTITY                 |
| TOTAL CLAIMS  |  |   | 36              |   |  | į.               | ſ          | RATE         | FEE                    |       | RATE      | FEE                    |
| FOR   |  |   | NUMBER FILED    |   | NUMBER EXTRA                           |                  | [          | BASIC FEE    | 355.00                 | OR    | Basic Fee | 710.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | 36 minus 20=    |   | · 16                                   |                  |            | X\$ 9=       | 144.50                 | OR    | X\$18=    |                        |
| INDEPENDENT CLAIMS  |  |   | 7 minus 3 =     |   | • 4                                    |                  |            | X40-         | 16000                  | OR    | X80=      |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |                 |   |  |                  | Ī          | +135=        |                        | OR    | +270=     |                        |
| * If the difference in column 1 is less than zero, enter  |  |   |                 |   | ************************************** | olumn 2          | L          | TOTAL        | 6590                   | OR    | TOTAL     | _                      |
| CLAIMS AS AMENDED - PART II   |  |   |                 |   |  |                  |            |              | <del></del>            | ,     | OTHER     | THAN                   |
|   |  |   |                 |   |  | (Column 3)       | _          | SMALL        | ENTITY                 | OR    | SMALL     | ENTITY                 |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | HIGH<br>NUM<br>PREVK<br>PAID            | BER<br>OUSLY                           | PRESENT<br>EXTRA |            | RATE         | ADDI-<br>TIONAL<br>FEE |       | RATE      | ADDI-<br>TIONAL<br>FEE |
| 夏   | Total  | . 34                                      | Minus           | •• 6                                    | 36                                     | =                |            | X\$ 9=       |                        | OR    | X\$18=    |                        |
| ¥   | Independent                                    | · /                                       | Minus           | ···                                     | 7                                      | -                |            | X40=         | /                      | OR    | X80=      |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |   |                 |   |  |                  |            | +135=/       |                        | OR    | +270=     | 7                      |
|   |  |   |                 |   |  |                  |            | TOTAL        |                        | OR    | TOYAL     |                        |
| 7-24-06 (Column 1) (Column 2) (Column 3)  |  |   |                 |   |  |                  |            | DOIT. FEE    |                        | J     | ADDIT.FEE |                        |
| AMENDMENT B   |  | CLAMS<br>REMAINING                        |                 | RIGH                                    | EST                                    |                  | Г          |              | ADDI-                  | 1     |           | ADDI-                  |
|   |  | AFTER<br>AMENDMENT                        |                 | PREVIO PAID                             | DUSLY                                  | PRESENT<br>EXTRA |            | RATE         | TIONAL<br>FEE          |       | RATE      | TIONAL:<br>FEE         |
|   | Total  | . 22                                      | Minus           | <u> ع</u>                               | 6                                      | -                |            | X\$ 9=       |                        | OR    | X\$18=    |                        |
| ¥   | Independent                                    | NTATION OF MI                             | Minus           | *** ^                                   | 7<br>CĆI AIM                           | - (-)            |            | X40=         |                        | OR    | X80=      |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                 |   |  |                  |            | +135=        |                        | OR    | +270=     |                        |
|   |  |   |                 |   |  |                  |            | TOTAL        |                        | OR    | YOTAL     |                        |
|   |  | A   | DOIT. FEE!      |   | , - · ·                                | ADDIT. FEE       |            |              |                        |       |           |                        |
| MENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | (Colui<br>High<br>NUM<br>PREVIC<br>PAID | IEST<br>BER<br>DUSLY                   | PRESENT<br>EXTRA |            | RATE         | ADDI-<br>TIONAL<br>FEE |       | RATE      | ADDI-<br>TIONAL<br>FEE |
| AMENDM  | Total  | •   | Minus           | **                                      |  | -                |            | X\$ 9=       |                        | OR:   | . X\$18=  |                        |
| ¥   | Independent                                    | <u> </u>                                  | Minus           | ***                                     |  | -                |            | X40=         |                        | 05    | X80=      |                        |
| L   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                 |   |  |                  | <b>│</b> ├ |              |                        | OR    |           |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.               |  |   |                 |   |  |                  |            | +135=        |                        | OR    | +270=     |                        |
| ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20."  ADDIT. FEE |  |   |                 |   |  |                  |            |              |                        |       |           |                        |
|   | The "Highest Num                               | ber Previously Pa                         | id For (Total o | Independ                                | ent) is the                            | highest numbe    | r foun     | d in the app | propriate box          | in ca | lumn 1.   |                        |
|   | 070 42   |   |                 |   |  |                  |            |              |                        |       |           |                        |